Data is a priority of the CDPHE Women's Health Unit (WHU). An extremely helpful resource, data is used for decision making, assessing program progress throughout the year, and evaluation of program activity. Agencies are required to submit data for the Family Planning Annual Report (FPAR) as per the Office of Population Affairs (OPA). The Women's Health Unit has established minimum data reporting requirements to ensure compliance.

#### WHAT IS THE FAMILY PLANNING ANNUAL REPORT (FPAR)?

The OPA relies on data to guide strategic program and financial planning as well as to respond to inquiries from policymakers and Congress about the Title X program. FPAR is the tool by which the data is reported and allows the OPA to assemble consistent and relevant program data from all Title X programs across the nation. The OPA is then able to answer questions about the characteristics of the population served, utilization of services offered, and the composition of revenues that complement Title X program funding. FPAR's use of standard definitions for key data elements – for example, unduplicated number of family planning users, user age, and user income – have resulted in valid and reliable estimates of key indicators, which allow for comparisons across regions and over time at all levels of the program.<sup>1</sup> Further information on FPAR is available from the WHU.

#### **HOW IS DATA COLLECTED FOR FPAR?**

To facilitate the collection and reporting of data, the WHU utilizes the *IRIS* data collection and reporting application. Agencies enter data into IRIS directly by the 10<sup>th</sup> of each month, i.e. January data must be entered by February 10<sup>th</sup>. (Alternate data submission methods may be available in some circumstances). Users and their supervisors must fill out security access forms and submit a supervisor letter in order to granted access to IRIS. The forms and a template of a supervisor letter can be found at <a href="https://cxf.dphe.state.co.us">https://cxf.dphe.state.co.us</a> or by contacting the WHU Data Coordinator at 303-692-2496. Once completed forms are received by WHU, users are given a user ID, passwords, and training on how to use the IRIS system. Security access is required for each user. User IDs and passwords should never be shared. Access is deactivated once a user has left the program.

IRIS offers various data reports that agencies will find useful. A list of reports available from IRIS and the data provided therein has been included in this manual. Instruction on how to generate agency specific reports is given at the time of IRIS training. The Data Coordinator may also be contacted directly with any questions, comments, or requests with respect to data reports.

### **HOW DOES DATA REPORTING AFFECT AGENCY FUNDING?**

Family Planning contractors are funded for the fiscal year based on the number of target Family Planning clients served in the preceding *calendar* year, (all men and women with incomes at or below 150% of poverty, and all teens\* who have received a qualifying procedure). Given this funding mechanism it is important to ensure that all target clients are reported.

\*Clients under 20 years of age.

<sup>&</sup>lt;sup>1</sup> "OMB Supporting Statement for the Title X Family Planning Annual Report (FPAR)", Department of Public Health and Human Services, Office of Public Health and Science, Office of Population Affairs, Office of Family Planning, April 29, 2003

### **USER SUPPORT:**

For Assistance with passwords for IRIS Family Planning or other technical support, agency staff should contact the Women's Health Unit Data Coordinator at 303-692-2496.

## **FAMILY PLANNING IRIS REPORTS**

Report #	Title of Report	Reported Data	Notes:
02	Contraceptive Methods of Patients by Age	Methods of contraception by age group for NQFP patients, QFP Patients, and NQNFP. Includes totals and percentages.	
02A	Contraceptive Methods of Patients by Age and Gender	Methods of contraception by age group and Gender for qualifying Family Planning patients.	This report will show number of qualifying and non-qualifying males seen.
03	Ethnicity/Race of Patients by Age	Ethnicity and Race by age group and gender.	This report will show number of qualifying and non-qualifying males seen.
05	Services Count	Services by age group and gender for NQFP and QFP and NQNFP patients.	This report counts services rendered and will included duplicates. Not to be used for patient counts.
08	Number of Clinic Visits by Provider Type	Number of clinic visits by provider type for NQFP, QFP and NQNFP patients.	Provider types: Clinic Asst., NP/CNM/PA, Physicians, RN, Other
12	Patients by Age, % Poverty and Type with Target	Number of patients by percent of poverty for each age group for NQFP, QFP and NQNFP patients.	This report also includes the target patient confirmation numbers sent by WHS for coordinator approval.
12B	Non-Qualifying Patients with Person ID	Patients by Patient ID who are NQFP clients. Shown by age group and poverty level.	CONTAINS PATIENT IDENTIFYING INFORMATION
12F	Qualifying/Non- Qualifying/Target YTD Summary	Number of qualifying, non-qualifying and target patients for the selected date range compared to the same date range of the previous year	
12M	Male Patients by Age, % Poverty and Type with Target	Report 12 for Male patients ONLY	
13	Visits and Patient Loads	New Patients and total number of clinic visits by total number of patients for NQFP, QFP and NQNFP patients.	
13B	Visit Types of Patients - Detail	Total number of clinic visits by Visit Type and age for NQFP, QFP and NQNFP patients.	
13C	Visit Types of Patients - Summary	Total number of clinic visits by Visit Type	

Report	Title of Report	Reported Data	Notes:
14	Tickler Report	Itemized list of ticklers, listed by follow-up date, patient name, patient ID, category/description of follow-up, phone number and date last updated.	CONTAINS PATIENT IDENTIFYING INFORMATION
16	Non-Qualifying Clients	Non-qualifying patients (male & female), showing patient name, birth date, patient ID, visit date, and fertility status. (Listed in numeric order by patient ID).	CONTAINS PATIENT IDENTIFYING INFORMATION
17	Patients Without Visit	Patient names, ID, birth date, and county who have a patient record but have no clinic visits entered into IRIS. (Listed in numeric order by patient ID).	CONTAINS PATIENT IDENTIFYING INFORMATION
18	Patients by Insurance Coverage	Number of patients who have private insurance that covers FP, does not cover FP, or FP coverage is unknown and number of patients who have public insurance, either Medicaid or an unknown type of public insurance and patients who are uninsured and patients whose insurance coverage status is unknown.	
19	Contraceptive Continuity by Age	Number of patients by age who were on an effective method of contraception during the previous period, remained on an effective method for the current period, percent of current users with respect to previous users and percent of patients who changed to no method, changed to no method and are seeking pregnancy or those who are pregnant.	When generating a report, whatever current period you choose will dictate the "previous period", I.e. if current = 04/01/2005 - 04/30/2005 then previous = 04/01/2004 - 04/30/2004
19 - 3P	Third Party Contraceptive Continuity	Report 19 for Third Party Sites	
20	Pregnant Patients by Intendedness and Age	Number and percentages by age of qualifying FP clients who did not want to be pregnant then or in the future, wanted to be pregnant later, wanted to be pregnant sooner, or wanted to be pregnant then.	

Report #	Title of Report	Reported Data	Notes:
21	Pregnant Patients by Intendedness, Income and Age	Number of Pregnancies by age and income groups for NQFP, QFP and NQNFP patients. showing those who did not want to be pregnant, wanted to be pregnant later, wanted to be pregnant then, and wanted to be pregnant sooner	
22	Limited English Patients by Language	Number of patients with limited English language skills by Agency	
22A	Limited English Patients by Language Summary	Number of patients with limited English language skills by native language.	
23	Agency Comparisons with State Totals	CURRENTLY UNAVAILABLE	

The following is a sample of a Supervisor Letter. This form can be downloaded from the Women's Health Unit website at: http://www.cdphe.state.co.us/pp/womens/FPNursingConsntsForms.html

#### SUPERVISOR LETTER TEMPLATE

### **User Agency Letterhead**

Colorado Department of Public Health and Environment

Program Name and Mail Code
4300 Cherry Creek Drive South

Denver, CO 80246-1530 (use for one user, one or more information systems)

Date

To Whom It May Concern:

User Name is an employee (contractor, volunteer, intern, etc) at Agency Name. As his/her supervisor I am requesting User Name be given access to Colorado Department of Public Health and Environment (CDPHE) information system(s): insert system name(s) here. This access is necessary in order for User Name to be able to do their work for Agency Name.

I understand that if *User Name* leaves *Agency Name*, or no longer needs access to the above CDPHE information system(s), I will request that unneeded access will be disabled **immediately**. I also understand that if I have any questions about the status of the access, I can contact the owner of the above information system at the Department of Public Health and Environment at (303) 692-2000 or 1-800-886-7689 (In-state.)

Sincerely

Name Title

The following is a sample of the Secure External User Form. This form can be downloaded from the Women's Health Unit website at:

http://www.cdphe.state.co.us/pp/womens/FPNursingConsntsForms.html



## STATE OF COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

Please fill out online and print, deliver, mail or fax

### Secure EXTERNAL User ID Form

Instructions: A letter on agency letterhead, signed by the applicant's supervisor, must accompany this form. Make certain pages 1 and 2 are completed and signed. Complete the first lines only at the top of page 3. The department completes the gray area on page 3. The list of program(s) provided at the top of page 3 is used to determine the applicant's access. An authorizing department staff member will contact the applicant when a new ID is set up or changes to an ID are completed.

Do you ha	ve a user ID for ANY depar	tm	ent application? What is it?		
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Applicant			( ) -			
Applicant's Supervisor			( ) -			

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Applicant Signature	Title	Date
Supervisor Signature	Title	
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Renewal User ID		Agency Name	: (1)
<b>-</b> .			Colorade Department of Public Health and Environment
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Supervisor Name	Signature	Date	
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